

D.C. Office of Personnel
District of Columbia Employees' Health Benefits Program (DCEHB)
Effective March 1, 2005

Plan Name	Enrollment Code	Your Share of Premium Bi-weekly	The District's Share of Premium Bi-weekly	Member Services Contact Number	Insurance Group Code
Cigna (PPO)	CN1 (self only)	\$ 49.64	\$ 148.93	1-800-251-0669 (medical)	25724-A
	CN2 (family option)	\$130.07	\$ 390.21	1-800-367-1037 (dental)	
Aetna (HMO)	HM1 (self only)	\$ 30.30	\$ 90.92	1-888-792-8742	172614
	HM2 (family option)	\$ 78.80	\$ 236.40		
Kaiser Permanente (HMO)	KP1 (self only)	\$ 29.17	\$ 87.52	301-468-6000	13703-0
	KP2 (family option)	\$ 75.75	\$ 227.26		
MD IPA (HMO)	MD1 (self only)	\$ 28.15	\$ 84.45	1-800-251-1712	M14517
	MD2 (family option)	\$ 73.03	\$ 219.10		

Please note: The District of Columbia government contributes 75 percent of your total premium cost. Your share – 25 percent is deducted from your paycheck on a pre-tax basis, which increases your take home pay.

10/25/2004